THE METHODIST CHURCH - DARLINGTON DISTRICT

APPLICATION FOR an INDIVIDUAL or GROUP BURSARY

PLEASE COMPLETE IN BLOCK LETTERS IN BLACK INK or TYPE

Name of applicant:				
Age (if under 25 years)				
Address:				
Church and Circuit:				
Positions held or involvement in Church activities:				
Details of conference/course to be attended. i.e. title, venue, date, brief outline of content etc. (You MUST enclose an official programme to give additional information)				
Conference/course fees:	Travel expenses:			
Additional criteria in support of this application: (IF APPLICABLE)				
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What other bodies have you approached for financial support e.g. Local Church, Circuit,

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Local Education Authority	? (Please state amount o	f any assistance being g	given)	
Have you previously a	oplied for a Bursary?		YES/NO (Delete one)	
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If YES, when did you a	pply and was the appli	cation successful? (S	State what the bursary	
was for)	ppry and mad are appr		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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Have done this configuration differ from consumptions and the Configuration				
How does this application differ from your previous application?				
Comments, in support of application, by Circuit minister:				
Signed : Applicant	Date:	Minister	Date:	
Signed . Applicant	Date:	MILLISTEL	Dale.	
FOR COMMITTEE LICE				
FOR COMMITTEE USE	: Date received:	Individual/group:		
Amount granted:	Date cheque issued:	Considered by:		
Amount granteu.	Date Glieque 155ueu.	Considered by.		